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ABSTRACT

This bulletin, published three times annually, reports on promising practices in the pupil services disciplines serving Wisconsin youth, and stimulates professional activity in the pupil service field. This issue includes articles dealing with: (1) a teacher education program in communication skills; (2) a guide to counseling mentally handicapped students; (3) a curriculum for guidance in the elementary school; (4) an evaluation of consumer satisfaction with health services for exceptional children; (5) a discussion of Fetal Alcohol Syndrome as a significant cause of birth defects; and (6) a description of the Wisconsin Writing Project, a group of teachers dedicated to improving the writing skills of their students. Also included are a review of books and resource materials, staff news, and guidelines for authors. (Author/NRB)

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Guidelines for Pupil Services

The Wisconsin Department of Public Instruction
Volume 17, Number 2 Fall 1979

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COMMENT:

Plus ça change, plus c'est la même chose!

COUNSELING IN WISCONSIN SCHOOLS

Do you have pupils in your class or school who are not working up to capacity? Do you have boys and girls whom you have not been able to understand? Have you known young people who were "just going to school", who did not appreciate what their studies were doing for them, and who had no purpose or plan in life? Have you seen them later drift from job to job or flounder around in a college course? If your answer is "yes" to any of these questions, you will be interested in this bulletin on guidance which seeks to show how Wisconsin teachers try to prevent as well as cure these conditions.

What is guidance? An adequate understanding of it has been hampered by certain habits of mind which have rooted themselves in the minds of teachers, administrators, and others interested in it. There is the false notion that guidance is telling a person what to do or be. In all education today we are striving to develop pupil activity, and so the best kind of guidance is self-guidance, the kind of guidance that develops resourcefulness, that enables a young person to make his own decisions based on adequate information and in general take care of himself intelligently.

There is also the idea that the type or brand of guidance is the important thing. Illustrative of this sect are those who believe that the only type of guidance worth anything is vocational guidance, and on the other hand are those who are likely to call vocational guidance futile and set up educational guidance as the only need of the hour. Meanwhile during this heated debate the real person at issue, the child, is forgotten. His needs go unmet. If you start with an individual child and study his needs, you will soon find out what type of guidance is most important for him at any particular time.

A third erroneous concept which has hampered our understanding is the idea that guidance is for the few instead of the many. Every normal boy and girl, whether he be aware of the fact or not, has problems which may reduce the measure of his future happiness or prevent him from realizing himself.

Guidance starts with children. It is interested in the whole boy and the whole girl. It is concerned with their present adjustment to school, teachers, and school mates and with the progress and development which they are now achieving. This is the adjustment phase. Guidance is also concerned with future planning, planning for a child's next school step, for his next selection of studies, planning for work experience, planning for college, or planning for a life work. This is the planning phase. While considered separately here, in actual practice, they are nearly inseparable. Present problems must be considered in the light of future plans, and plans made for the future without considering a student's progress and without helping him with present adjustments are likely to miss the mark. When schools undertake to study adequately each individual included in their enrollments and strive to help each one to make the wisest and best use of his present opportunities, as well as to plan wisely for his future education or career, they are doing "guidance work" no matter under what name they may do it. Indeed most schools and most teachers have given such help in the past to a few pupils but such incidental and

periodic services must be organized, directed, and expanded until they reach "all the children of all the people."

In the formulation of any guidance program, it is essential that the three activities of individual counseling, group counseling, and use of factual material be considered whether it be on the elementary, junor high, senior high, or vocational school level.

Individual counseling is the heart of all guidance work. It may consist of interviews with students regarding their adjustment to their school progress, selection of a school or course of study, some social or personality difficulty, as well as conferences regarding their plans for the future. "It ought not be necessary for a child to get into trouble to receive this individual attention." Every pupil should have the beneift of individual counseling many times during his school career.

From the problems of numbers of individuals, it is possible to discover those which are common to the majority. These common problems form the basis for group advisement, and economy of time and money demands that they be so handled. Home rooms, classes in occupations, life-work conferences, assemblies, club meetings, field trips all are media for such advisement. However, group guidance should never be considered a substitute for individual counseling.

Something more than "wistful wishing" to help a student is necessary. Nor can "personal impressions" be relied upon. Guidance must have a sound basis in facts. Sound guidance must be based on an accurate knowledge of the individual to be counseled as well as on a thorough understanding of the types of maladjustment and the various educational and occupational opportunities which confront him.

The proper development of the child involves more than education through subject-matter and vocational guidance. It involves doing whatever is necessary to the success of the undertaking; the education of the whole child. Very frequently in cases of failure, physical handicaps, and poor home environment, special talents or the emotional attitude of the child are the keys to the situations.

Bridging the gap between the elementary school and the junior high school, motivating pupils to work more nearly up to their capacities, including all pupils in the counseling program, and providing cumulative record cards, represent some of the procedures used in Wisconsin elementary schools.

In the junior and senior high schools, how to study campaigns, occupational talks by teachers or outside speakers, field trips, clubs, case studies, prognosis tests, interviews to prevent drop-outs, are a few of the procedures used in pupil guidance.

These procedures do not constitute a system of guidance, but rather they are intended to suggest what it may consist of. There is no lack of available material on procedures for those who desire to work out a program suited to their needs.

If the teacher and administrator will keep the welfare of the child in mind, not his education, not his social development, not his cultural development; but the child himself, his particular needs, his individual interests, his general capacity, his special talents, they should be able to select procedures suited to the needs of the pupils.

There is great necessity for emphasizing this point of view, in order to prevent guidance from becoming a more or less perfunctory routine. Without a spirit of helpfulness on the part of the teacher and counselor, and without the desire to be of real service to the pupils, procedures may be of little value.

[Editor's Note: In reading the above commentary, one is struck by an occasional strangeness of language or terminology. This awareness is put into proper perspective, however, when one learns that these comments are taken from a *1933* publication of the Wisconsin Teachers Association, *Counseling in Wisconsin Schools.* Draw your own conclusions . . . .]

Teaching Teachers: One Counselor's Approach

Joyce Schnepf

Described in this article is a class for teachers which has been offered for the past four years by a counselor at Watertown, Wisconsin Senior High School. The class has evolved and changed each year to incorporate new materials in the area of communication skills for teachers.

The Idea for the Program

School counselors have expertise in the area of human relations together with communication skills that can be of value to the educational program of their schools. By organizing and presenting voluntary programs for teachers, counselors can help them develop effective communication skills and human relations and communication models for use in their classrooms.

This is also an opportunity for counselors to present to teachers and administrators a graphic explanation of their role and function. This can serve to enlarge the counselors' sphere of influence and aid their being seen as competent professionals worthy of support.

Toward this end, a program providing after school training for teachers in communication skills and problem areas facing students was designed and implemented during the past four years at Watertown Senior High School. Eight teachers completed the course the first year it was offered; in 1978-79, twenty-seven (27) teachers completed the course.

Growth of Program

As an incentive for teachers to become involved, the Superintendent of Schools was approached four years ago to see if he would authorize Board of Education credit for such a course. Board credit is given to teachers for special projects they undertake, non-university credit workshops, or other programs. This credit applies toward the required number of credits teachers in this district must earn (six credits every five years). Credit for the program was approved.

The first class was for high school teachers and called, "The After School Teacher Seminar". The sessions were two hours long and the class met every other week for a total of eight weeks. A variety of topics were discussed: learning disabilities; behavioral disabilities; teacher effectiveness training; values clarification; and, relaxation techniques. Speakers from within the district or neighboring districts were brought in to present most of the topics.

The second year a different approach was tried. It was arranged to have other people do the majority of the presentations. The local county mental health clinic was contacted with a list of proposed topics. These included: violence in the school and home; divorce and its effects on children; depression and the child; death; hyperactivity in children; and, the pregnant teenager.

The title of the second course was, "Children in Crisis". It was open to all public and parochial school teachers in the district. There were eight meetings, each two hours in length, meeting once a month. The course provided an excellent forum for teachers to meet the school counselors, social workers and psychiatrist from the mental health facility. This also opened up new referral sources for the county.

The third year it was decided to forego the use of "outside" personnel in teaching the course. During a 1977 Summer Session Workshop in Counseling and Guidance at UW-Madison, a revised format for the course titled, "Communication Skills for Teachers," was developed. The class would emphasize that communication is a learned behavior; therefore, if we are ineffective at communicating with our students, spouses,

Ms. Schnepf is School Counselor, Watertown, Wisconsin Senior High School.

families or friends, we could learn new ways to communicate. Sessions would deal with listening skills, teacher effectiveness training, transactional analysis, Virginia Satir's model of communication; learning modes (auditory, visual, kinesthetic), and values.

The class would meet every other week after school for two hours. There were eight sessions planned.

Some of the teachers who took the course inquired afterwards as to whether there was some way to offer the course next year for university credit. During the 1978 Summer Workshop in Counseling and Guidance, the course outline was submitted to the Counseling and Guidance Department Chairperson of the University of Wisconsin-Madison. The course was approved for one graduate credit in Independent Reading through the Department of Counseling and Guidance. So that teachers who had already taken the course could apply to take it again for credit, the outline was revised and the title changed to, "Communication and Awareness Skills for Teachers".

Much of the material and information learned during the 1978 Summer Workshop was incorporated into the course. Again, the communication models covered included: teachers' effectiveness training; transactional analysis; listening skills; groups and the communication patterns unique to them; and, suicide as the "ultimate communication".

Other topics studied included various "awareness" areas. Memory systems, concentration and visualization skills were touched upon as well as how to become positively addicted to activities which are good for one's mind and body.

Benefits of the Program

Several benefits have resulted from teaching these courses. Teachers have had an opportunity to learn about the school counselor both as a professional and as a person. What counselors do, how they communicate, and their beliefs and values came across during the course. Through example and the atmosphere created in the classroom, teachers can feel free to explore these areas in themselves. Teachers have also been exposed to a variety of new ways to communicate more effectively, not only with students, but with family members and each other.

Since teaching the course, teachers are using our counseling and guidance expertise more often as resource persons in their classes to speak on various topics discussed during our sessions. There has also been an empathetic self-reawakening of what teachers feel as they prepare for and teach their classes. This has created a positive bond between teacher and counselor which enhances working relationships.

These benefits, and a great sense of personal satisfaction, make the time and energy invested in this program worth any counselor's effort. Others who would choose to initiate a similar approach can be encouraged and supported by our experiences. Suggested resources include:

Ernst, K. *Games students play*. Millbrae, California: Celestial Arts Publishing, 1972.

Glasser, W. *Positive addiction*. New York: Harper & Row, 1976.

Gordon, T. *Parent effectiveness training*. New York: New American Library, 1970.

Gordon, T. *Teacher effectiveness training*. New York: Peter Wyden Publishing, 1974.

Harris, T. *I'm OK - You're OK*. New York: Avon Books, 1967.

Klagsburn, F. *Youth and suicide*. New York: Pocket Books, 1976.

Lee, J. & Pulvino, C. *Educating the forgotten half*. Dubuque, IA: Kendall/Hunt Publishing Co., 1978.

Miller, S., Nunnally, E. & Wackman, D. *Alive and aware*. Minneapolis: Interpersonal Communications Programs, Inc., 1975.

Phillips, P. *Am I OK?* Niles, IL: Argus Communications, 1975.

Powell, J. *Why am I afraid to tell you who I am?* Niles, IL: Argus Communications, 1969.

Satir, V. *People making*. Palo Alto, California: Science and Behavior Books, Inc., 1972.

Schrank, J. *Teaching human beings*. Boston: Beacon Press, 1972.

Simon, S. *Values clarification*. New York: Hart Publishing Co., 1972.

Mentally Handicapped Students: The School Counselor's Role

Pat De Luca

School counselors must better meet the counseling needs of the increasing number of mentally handicapped students who are attending "regular" schools. Counselors need training to deal effectively with mentally handicapped students. They also must be familiar with specific counseling methods which may improve success with these students. This article proposes a sequence of four content areas that will prepare school counselors to better deal with mentally handicapped students. Nine suggestions are presented which can be utilized as a guide when counseling mentally handicapped students.

Counseling and the Mentally Handicapped

Counseling needs of mentally handicapped students are a responsibility of the school counselor. There are an increasing number of mentally handicapped students who attend "regular" schools. Although education of these students has traditionally been segregated, recent legislation is the catalyst for integration of regular and special education programs. Integration creates challenges for all educators, and specifically for school counselors.

Mentally handicapped students require counseling services as a portion of their educational programs (Cruckshank & Johnson, 1967; Kolstoe & Frey, 1967; DeBlasse & Cowan, 1976). Counseling services are crucial for success of these students' functioning in school and the community (Knapp, 1962; Novak, 1977; Wyne & Skjei, 1970). Literature is sparse concerning the preparation and role of school counselors for providing services to mentally handicapped students (Cormay, 1970; Novak, 1977; Huber & Westling, 1979). Novak (1970) states, "There is clearly a need for 'crash' in-service upgrading of counselors in special education, with appropriate emphasis upon the counseling needs of retarded pupils [p. 133]." Counselors are not usually adequately prepared to meet the counseling needs of these particular students. Novak (1970) states, "Although special education classes were found in 82% of the schools . . . about 43% of the counselors had any special education course work and only 24% had a course on the mentally retarded [p. 131]." Huber and Westling (1979) note that counseling is a necessary portion of a mentally handicapped student's mainstreaming program, and that preparation of school counselors in the area of mental retardation is necessary. Training should consist of a basic background in mental retardation and practicum experiences counseling these students under supervision of special education personnel.

Training Program

Most counselors possess little experience with mentally handicapped students and university training programs lack emphasis on counseling these students. Training could be acquired by participation in the following proposed program, or some adaptation of it based on local variations. Four basic content areas in this program would be required: (a) *Introduction to Special Education;* (b) *The Mentally Handicapped Student;* (c) *Methods and Procedures for Counseling the*

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Mentally Handicapped and (c) *Counseling Practicum (Mentally Handicapped)*.

An overview of special education and various types of handicapping conditions would be included in *Introduction to Special Education*. Information and characteristics would be presented about the following populations: severely, profoundly, trainable and educable; learning disabled; emotionally disturbed; speech, hearing and sight impaired; and physically and multiple handicapped.

Mental retardation areas of profound, severe, trainable and educable would be presented in *The Mentally Handicapped Student* content area. Included would be a study of characteristics and discussions concerning education and learning styles of mentally handicapped students.

Elements of counseling mentally handicapped students would be addressed in the area on *Methods and Procedures*. Counseling techniques would be practiced by individuals during a specified "mini-practicum" (10-15 sessions).

During the *Counseling Practicum* itself, individuals would counsel mentally handicapped students in schools for one semester. The practicum would be supervised by university and school special education personnel.

The proposed program is similar to a model currently utilized by the Madison, Wisconsin Metropolitan School District in the area of vocational education. Vocational education instructors are attending classes in special education and will be involved in special education practicum experiences.

The four content areas could be incorporated into already existing course work and practicum experiences. Since some counselors may experience difficulty completing required practicum work, this requirement may be fulfilled within the counselor's own employment setting in conjunction with building special education staff and the university. Counseling programs for mentally handicapped students that would become a regular portion of school counseling services could be implemented as a final project for the *Counseling Practicum*.

Suggestions for Counselors

Methods for counseling the mentally handicapped are as unique as the individual needs of these students. Since it would be difficult to list every effective method, a limited number of suggestions will be offered. When utilizing these methods, consideration must be given to counselor/student ratio, school policy, length of school day and class period and school facilities.

1. *Become aware of the characteristics and problems of the students.* Many mentally handicapped students display the following characteristics:

1.1 Short attention and retention spans
1.2 Slow learning
1.3 Difficulty in understanding abstract ideas
1.4 Difficulty in associating words with ideas
1.5 Limitations in expressive language
1.6 Limitations in foresight and planning

These characteristics often create problems when the mentally handicapped interact with their environments. Common problems encountered by these individuals include: emotional instability; little respect for others; poor academic achievement; unwarranted fears; misbehavior; and, failure to secure employment.

Characteristics of mentally handicapped students combined with these common problems present many challenges for school counselors.

2. *Select topics for counseling sessions that may help eliminate problems of students.* Counselors should select appropriate topics for counseling sessions that may help eliminate problems of mentally handicapped students.

Topics may include:

2.1 Setting personal goals through self-evaluation.
2.2 Attaining better grades through consistent class attendance.
2.3 Increasing positive self-image.
2.4 Increasing personal and social skills through social and occupational adjustment.

These topics are not essentially different from those relevant for all students. The challenge for counselors is communicating effectively with mentally handicapped students. This is accomplished through methods which are mindful of their characteristics and common problems.

3. *Utilize group counseling techniques with students.* In school environments, individual and group counseling approaches are effective methods for working with mentally handicapped students. The decisions to utilize one method over

another depends upon the characteristics of students and topic(s) of the counseling session. Group counseling has been found to be successful with mentally handicapped students (Lee, 1977; Vance, 1977; DeBlasse, 1976; Wyne, 1970), and it may be possible for counselors to efffectively work with ten students in a half-hour session.

4. *Use group discussion and stories with students.* Group discussion may give students opportunities to express their needs and concerns. Keeping in mind the characteristics of mentally handicapped students, most group discussions should be short (about 30 minutes), consist of simple language, and kept as precise, concrete and as clear as possible by the counselor (Vance, 1977). The use of stories is another method which is effective with these students. Since they often have difficulty comprehending abstract ideas and associating words with ideas, stories should be simple and students should be required to relate their interpretations to insure comprehension.

5. *Art, dance, puppetry and play therapies are effective for students who display "expressive language" deficits.* Many mentally handicapped students display deficits in expressive language. To allow these students to express themselves, counselors can rely on art, dance and puppetry therapy (Long, Morse, and Neuman, 1971). For example, students can draw pictures of themselves as a portion of a self-image counseling session. Also, the use of puppets allows students to express feelings indirectly toward peers and/or counselors. When working with younger students, play therapy (Dupont, 1969) is an effective method; play therapy helps students direct feelings more easily toward counselors because it is seen as part of a game rather than as traditional therapy.

6. *Use methods that involve students in experiencing things physically.* Role playing is used by counselors to open communication channels with mentally handicapped students (Kolstoe, 1971; Dreikus, Grunwald, & Pepper, 1971). Role playing is an excellent counseling method because students generally learn at a greater speed and retain things they have physically experienced. Some mentally handicapped students have difficulty developing personal and social skills. During a group counseling session, situations can be created to demonstrate proper behavior toward others. For example, students assume roles of school personnel (teachers, principals) and "act out" the proper manner of greeting and conversing with them.

The "Age Game" (Belkin, 1976) is a specific role playing method. Students assume any age they wish and during that session they cannot assume any other age. This is an excellent method for students who feel they have too much responsibility and wish they were younger. Most students, in fact, dislike becoming younger and realize that responsibilities such as job seeking and planning for the future are a part of becoming an adult. In order for role playing to be effective, counselors must assure that the sessions will be highly structured. Role playing sessions that are unstructured can become counterproductive.

7. *Desensitization therapy can be used to eliminate fears in students.* Another method that may be used with mentally handicapped students is desensitization (Belkin, 1976). Desensitization methods are employed when students fear something or someone. For example, counselors may employ desensitization with students who fear school, swimming pools, noisey shops, normal peers, "gruff" teachers, authority figures or new situations. Elimination of fears helps students improve emotional stability and academic achievement.

8. *Behavioral counseling is successful with students.* The basic approaches in behavioral counseling (Pietrofesa, et al, 1978) include the use of positive and negative reinforcements. Privileges can be awarded or withheld to elicit socially acceptable behavior. For example, difficulty attending classes can be a problem for students. Counselors can initiate systems in which students earn "free time" for attending all classes, or receive after school detentions for missing classes.

9. *Whenever possible, utilize reality therapy with students.* Reality therapy (Belkin, 1976) is another method that is successful with mentally handicapped students. The "key to success" is the level of involvement of school counselors. Students must feel counselors care about them and trust in them. Once this relationship is established, students and counselors work together to eliminate problems. The first step includes school counselors pointing out to students that their behavior is not satisfactory. The most crucial step in reality therapy is formulation of a plan to improve the student's current situation.

For example, if students are not completing assigned work, counselors initially make them acknowledge that their unsatisfactory behavior will result in poor grades and help students develop a plan to remedy the situation. The plan should be *written in simple language* which enables students to easily understand it. To keep the plan clear and concise, *commitments should be numbered*. When counselors and students agree to a plan, *both should sign it*. When the plan is violated by students, the process should be repeated and a new plan formulated. This method is not time consuming and is effective.

Conclusion

School counselors must acquire both the knowledge and training necessary to meet the challenges presented by mentally handicapped students. This may require course work as well as on-the-job training. Counseling methods that are successful with mentally handicapped students need to be investigated by counselors. This article has attempted to identify some of the many useful approaches counselors may apply in helping mentally handicapped students cope with and overcome their disabilities.

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Wyne, M.D. & Skei, P. The counselor and exceptional pupils. *Personnel and Guidance Journal*, 1970, 48, 282-35.

Check Your Calendar

October 2-November 13, 1979	**Drive-In Conferences (15) on Wisconsin Post-Secondary Planning Programs** Lon Sherman, Chair University of Wisconsin, Whitewater
October 25-27	**Annual Conference** Wisconsin Association for Health, Physical Education and Recreation Concourse Hotel Madison
October 25-26	**Fourth Annual Conference** Wisconsin Federation of Pupil Services Telemark Lodge Cable
February 28-29, 1980	**Annual Conference** Wisconsin School Counselor Association Holiday Inn Stevens Point
March 26-30	**Annual Convention** American Personnel and Guidance Association Atlanta, Georgia

A Curriculum For Guidance In The Elementary School

James O. Smith and Anita Husby

In May of 1978 the Fall Creek, Wisconsin School District received an ESEA, Title IV-C grant to establish a unique elementary school developmental guidance program for 1978-79.

Adapted from a program developed in the Menasha, Wisconsin School District during 1977-78, the emphasis was to develop and establish a sequential, developmental guidance program in a small rural elementary school. The project was implemented with the assistance of the Wisconsin Department of Public Instruction.

Fall Creek is a rural community close to Eau Claire, Wisconsin. There are about 925 students in the school district with 425 enrolled in the elementary school in grades K-5. Until 1978-79, the secondary school counselor served the elementary school on a crisis basis only with additional support provided through a part-time school psychologist. Realizing that this was not meeting the needs of all the elementary school students, the Board of Education approved a plan to strengthen and expand the counseling and guidance program in the elementary school. This plan included application for a Title IV-C, Elementary and Secondary Education Act (P.L. 93-380) grant. The grant was approved and received in May of 1978. The Wisconsin Department of Public Instruction assisted in the writing of the grant proposal as well as in implementation of the project activities.

Planning

One classroom teacher from each grade level, the elementary school counselor, the building principal, and a consultant (an experienced elementary school counselor from a neighboring school district) met for two weeks in June, 1978 to develop a sequential developmental guidance program for grades K-5. The first task was to develop a curriculum based on the developmental levels of elementary school age children. The outline which was followed is shown in Figure 1.

After reviewing a variety of records, books, filmstrips, kits, and games, the teachers developed at least *three* activities for each "introduce" category of developmental guidance activities, *five* for each "stress" item, and *three* for each "expand" item. The activities were combined in booklet form for each grade level. Two hundred sets of these booklets have been printed and distributed throughout the state.

Implementation

The philosophy that guided the writing of the developmental guidance activities was that guidance should be an integral part of the school day. Activities were often related to a range of curricular areas (e.g., reading, math, art and social science). Two days of in-service were spent in the fall of the year acquainting teachers with the "new" curriculum, activities and philosophy of developmental guidance. Four one-hour in-service programs followed during the year to cover teacher-chosen topics relating to guidance areas.

Mr. Smith is Principal and **Mrs. Husby** is School Counselor, Fall Creek Elementary School, Fall Creek, Wisconsin.

Figure 1

Fall Creek Elementary School

Development Guidance Curriculum

Developmental Stages/Tasks	Grades					
	K	1	2	3	4	5
Understanding Self						
Body awareness	▽	0				
Talents and abilities	□	▽	▽	▽	0	0
Individual uniqueness	□	▽	▽	0	0	0
Developing independence	□	□	□	▽	▽	0
Understanding Feelings						
Naming and recognizing our own feelings	□	▽	▽	▽	0	0
Other people have feelings	□	▽	▽	0	0	0
Expressing feelings		□	▽	▽	▽	0
Determining the feelings of others			□	□	▽	▽
Understanding emotional maturity					□	▽
Understanding Others						
Making friends	□	▽	▽	▽	0	0
People are valuable and unique		□	▽	▽	0	0
People have talents and abilities		□	▽	▽	0	0
People Interact (Groups)						
Sharing	▽	▽	0	0		
Co-operation	□	□	▽	▽	▽	
Contributing			□	□	▽	▽
Leading			□	□	▽	▽
Being In A Family						
Family membership	□	▽	▽	0	0	
Families serve a purpose		□	□	▽	0	0
Family changes	□	□	□	▽	▽	▽
People Communicate						
Developing listening skills		□	□	▽	▽	▽
Relating a clear message			□	□	▽	▽
Understanding Choices and Consequences						
Making decisions				□	▽	▽
Problem solving				□	□	▽
Understanding values					□	□

Code: □ Introduce ▽ Stress 0 Expand

The plan for expanded elementary school counseling and guidance called for the school counselor to work in the preventive mode as a project facilitator by modeling or teaming with teachers once a week for a half-hour activity in each classroom. The counselor also helped teachers plan lessons, introduced teachers to materials, and conducted in-service programs. Small groups of students were organized from most of the classrooms, meeting twice a week for four to six weeks with the counselor. Large group work was used as a basis for small group activities.

The Counselor Described

Toward the end of the project year, the third graders were asked to describe a school couselor. Their comments to the question, "What is a counselor?" included:

A counselor is . . .

"Someone who teaches me about myself."
"Very nice and you can talk with them."
"A person you should see once in a while."
"Someone who likes to take care of me."
"A person who likes to be with people."
"Not a teacher, but is like a teacher."
"A nice lady who listens to me."
"A person who helps people."
"A person who likes you."
"A guidance teacher."
"A person who cares."
"A real friend."
"A nice guy."
"Mrs. Husby."

Evaluation

The ESEA Title IV-C project had an impact on many facets of the school. The teachers seemed to immediately benefit the most. Their attitude toward the students and each other seemed more positive and more understanding. This was verified through surveys and testing. Because the school was visited by many educators to see the project in action, teachers took pride in explaning classroom projects and how they fit guidance into their daily schedule.

The students benefited, of course, because of improved teacher skills and attitudes. Observation of student behaviors showed an increased acceptance of other human beings and fewer problems on the playground. Parents have commented that children are more open and are expressing their feelings more honestly. Parents are also requesting information and assistance as a result of the project. The district administrators are now viewing guidance services in a preventive mode and are making plans to extend the elementary school developmental guidance program into the secondary school level.

Resource Material

NATIONAL EMPLOYMENT LISTING SERVICES (NELS). This is a nonprofit organization within the Texas Criminal Justice Center at Sam Houston State University. NELS publishes both annual and monthly occupational materials in the fields of law enforcement, federal and criminal justice, human services and educational opportunities in criminal justice. Questions by students about entry level positions, qualifications demanded, application procedures, salaries and location are all addressed in various NELS brochures, guides and directories. Descriptive materials and ordering information are available on request to NELS, Texas Criminal Justice Center, Sam Houston State University, Huntsville, TX 77341.

Evaluating Health Services for Exceptional Children: A Focus On Consumer Satisfaction

Paul A. Sommers and Gregory R. Nycz

Consumer input into the delivery system of health care is a prerequisite to the improvement of that care (Sommers and Nycz, 1978). Evaluators of health care often recognize the need to include consumer input in an assessment of how well their services are being provided, yet fail to conduct evaluations which reflect this element (Sommers, 1973).

Physicians, Educators and Exceptional Children

Children having exceptional educational needs are entitled by federal and state law to an education which includes a complete multidisciplinary team assessment to confirm exceptional needs followed by the development of an appropriate educational program. There are many exceptional children who by nature of their handicapping condition must receive medical diagnosis and/or treatment services to complete an appropriate multidisciplinary team assessment and program development procedure (Sommers, Griese et al., 1978).

Palfrey, Mervis & Butler (1978) address Public Law 94-142, the *Education for all Handicapped Children Act*, from the point of view that a role for health professionals is *implied* rather than *defined* in this law. Although that involvement will vary somewhat from state to state, it will at a minimum provide for the counseling of parents whose children are under evaluation. These authors claim that the law assumes a sophistication of diagnostic ability and curriculum design that does not yet exist; this places a special burden upon physicians and others when attempting to deal effectively with patients. It also calls for the development of better training programs and assessment tools, and makes essential the enhancement of communication between clinicians and educators. The parents of those children involved must be part of the communication system with clinicians and educators, thus forming a network of support. Over the past few years there has been a trend in providing pediatric care. This has helped increase awareness of exceptional children and will result in guidelines for monitoring this care.

Consumer Satisfaction

A review of consumer input designed to modify clinical practice and its effect on health policy has been well documented in a variety of studies (Lebow, 1974; Lebow, 1975; Lister, 1976; Doyle & Ware, 1977). However, there is a paucity of data indicating how well clinical services are being provided to children with exceptional health and learning needs (Allen & Lelchuck, 1966). Due to increasing service and program needs for these children, both in medicine and education, a need exists to develop a system that assesses how well things are going. Education has its mandate through legislation for the provision of quality programs and services. Health professionals must also recognize the need to assure quality services and simultaneously develop a system making this assurance possible.

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Clinical services have generally been assumed by consumers to be of high quality, but this assumption has not been tested (Williamson, 1971). Consumers themselves can provide a means of assessing organizational needs, goals and objectives (Sommers, Jones, et al., 1970; Sommers, 1973; Jones & Sommers, 1975; Jones & Sommers, 1976; Doyle & Ware, 1977). Once the specific service expected by the consumer has been defined in relation to services available, it is a routine task to monitor consumer satisfaction. The difference between *optimum* and *actual* consumer satisfaction can be determined. By analyzing this difference, follow-up procedures can decrease the discrepancy between optimum and actual consumer satisfaction levels. The study reported in this article is an attempt to better understand the elements associated with the provision of multispecialty clinical services to exceptional children.

The Marshfield Clinic Approach

A longitudinal evaluation system has been implemented at the Comprehensive Child Care Center of the Marshfield Clinic. The Center began receiving referrals of children with exceptional health and/or educational needs in July, 1975. The distribution of problems experienced by the exceptional children served is presented below:

Diagnosis	*Percent (%) Served**
Learning Disabilities and/or Dyslexia	49
Hyperactivity	42
Mental Retardation	42
Emotional-Behavioral Adjustment Reactions	32
Physical-Crippling or Orthopedic Problems	18
Hearing Impairment-Deafness	13
Seizures	11
Speech-Language Disability	10
Visual Disability-Blindness	9
Other (a number of related categories occurring in less than 10% of the cases)	

*the percent (%) totals more than 100 since most children served had multiple diagnoses

There has been an increased emphasis throughout the states to combine or coordinate the delivery of health and educational services (Sommers, 1978; Sommers, Griese, et al., 1978). The Comprehensive Child Care Center, a unit of the Marshfield Clinic, coordinates its clinical services with the adjoining St. Joseph's Hospital and the Marshfield Medical Foundation for children with exceptional health and educational needs. The Marshfield Clinic, the nation's sixth largest private group practice, is located in Central Wisconsin.

All medical and surgical specialities are represented in the group. There are complete outpatient, x-ray facilities, laboratories, physiotherapy, patient counseling and library services. Clinic physicians have staff privileges at the hospital. The non-profit Marshfield Medical Foundation provides research and development opportunities. The population area served by the clinic contains approximately two million people. Over 300,000 patients are seen annually including 20,000 new or first time patients. Primary care is provided to over 47,000 patients from the immediate area, while secondary and tertiary care is provided to residents of central and northern Wisconsin. Fifty percent of the children seen through the Comprehensive Child Care Center are evaluated and treated without a need to return. These patients are referred back to their local physicians. Referrals to the Child Care Center come from public schools, private schools, clinics, developmental disablity programs, public health departments, social services, residential treatment facilities, state and federal agencies and directly from parents. A majority of the referrals come from Wisconsin.

Satisfaction Survey

Survey questionnaires were first administered in the fall of 1976 to the parents and case coordinators of 130 children (89 boys and 41 girls) with exceptional health and/or educational needs who were seen at the Comprehensive Child Care Center between July 1, 1975 and June 30, 1976. Parents and case coordinators of each child referred were asked to rate their satisfaction with services. Case coordinators are individuals in the child's home community who refer children for clinical services or coordinate the child's learning and other related day activities outside the jurisdiction of the home. Survey questionnaires were also sent parents and case coordinators of 144 children (101 boys and 43 girls) seen between July 1, 1976 and June 30, 1977. Through this approach the clinic could describe and analyze, on a

longitudinal basis, satisfaction with clinical services as perceived by the primary consumer groups. No attempt was made to follow individual children. Questionnaires were sent out six months from the time the services were provided and measured satisfaction with referral procedures, scheduling, clinical findings, progress being made by child and other important aspects of service.

One questionnaire was designed specifically for parents and another for case coordinators. Three questions on each groups' questionnaire were identical and have been used to determine the discrepancy of opinion between two different observers of a similar experience. Each questionnaire was mailed, complete with a self-addressed, stamped envelope for return mailing purposes. If the initial questionnaire was not returned, a second questionnaire was sent, accompanied by a letter stressing the need for the respondent's evaluation ratings and any other comments about the service. A personal telephone call soliciting the information followed if the second questionnaire was not returned.

Each respondent (parent and case coordinator for each child evaluated) was asked to respond to the questions on a rating of satisfaction scale ranging from 0 to 100 percent, with a rating of 50 percent being average. Only ratings from the most recent clinic visit were requested.

Interpretation of Results

Parents consistently gave higher ratings of satisfaction than case coordinators. This finding may be due to the personal contact associated with having a child evaluated and treated by physicians and their associated medical staff. Another possibility could be that parents and case coordinators want very different things from medical professionals. Due to federal and state laws, the parent now is placed in the responsible position of approving (or disapproving) services and programs for his/her children. Many children with exceptional needs are referred to the clinical specialists for a variety of reasons: To confirm or rule out suspected health problems, to provide health opinions on learning related conditions (e.g., learning disabilities, hyperactivity, minimal brain dysfunction), etc., and to give secondary or tertiary medical care opinions to other professionals. Sometimes parents refer their children to health professionals for purposes of gathering data that would be of value to their local school system or a community service agency.

Public Law 94-142 mandates provision of appropriate programs and services for children with exceptional health and/or educational needs. Although a role for clinicians in this act is implied rather than defined, the number of children receiving health services will continue to increase for two basic reasons: (a) health professional education and training programs are increasing for those interested in the pediatric specialities and (b) health professionals are more frequently being involved as team members (officially or in ex officio capacities) in the planning and developing of Individualized Education Plans (I.E.P.s) pursuant to P.L. 94-142. This interest will encourage more referrals of exceptional children to health care organizations.

More than 85% of all referrals to the Comprehensive Child Care Center are from non-health related organizations. This is illustrated in the following delineation of the clinic's referral patterns:

Referral Source	*% of Total Referrals*
Physicians	13.77
County and State Agencies	13.76
Private Agencies	16.31
Self	6.16
Public Schools	50.00
Total	100.00%

Given this situation, it is incumbent upon the providers of health care services to integrate their product in an appropriate manner with the expressed needs of primary consumer groups. The evaluation procedure discussed within this study assesses consumer satisfaction on a semi-annual cycle. By focusing on specific service elements over time, it is possible to align optimum versus actual consumer satisfaction. By focusing on each detected weakness of the delivery system and implementing corrective action the difference between optimum and actual consumer expectation levels can be decreased leading to an assurance of the most efficient level of service.

Conclusion

A study of consumer satisfaction with clinical services provided to exceptional children was the focus of this study. An attempt was made to evaluate how well clinical services have been provided and whether significant differences exist between two different consumer groups (child's parents and case coordinator) who have been asked to rate the same service. Results indicate that parents and case coordinators are significantly different in their overall rating of satisfaction with the same service.

The model of health care evaluation described in this article can be used in any program where a need exists to determine the level of satisfaction with a definable activity. Once a specific sevice can be evaluated, it becomes a routine task to monitor and describe its appropriateness. When problems or poor ratings occur within this system, a focus is placed on those elements (health care providers or other service activities) accounting for the problem. Modifications are made and the resultant effect is monitored at the next evaluation interval. Both consumer and practitioner benefit from this effort at evaluation of satisfaction.

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Career Counseling for Youth and Adults Project

Career Counseling For Youth and Adults began in March 1979 at the new Center for Career Development and Employability Training, University of Wisconsin-Oshkosh. The Center is a three-year project funded through Title II (P. L. 94-482) of the Vocational Education Act Amendments of 1976 in cooperation with the Wisconsin Department of Public Instruction.

The major purpose of the Center is to provide an extensive program of career assessment and counseling primarily for youth and adults in Winnebago and Fond du Lac counties. Youth target groups are those who are economically, physically or culturally disadvantaged, the gifted and talented and the exceptional education needs student.

Target groups of adults include displaced homemakers, mid-life career changers, "late bloomers," lifelong learners, retrainees, veterans, housewives, senior citizens and dropouts who have limited or no access to career counseling.

Each person receiving counseling must commit eight hours of time for individual or group counseling sessions. The program is open without charge to all persons interested in the service and not just to those in the identified target groups or those referred by community agencies.

The Center's program also includes in-service training for public and private school teachers to help them develop comprehensive career development plans, skills for working with students from the various target groups, and help to reduce sex-role stereotyping in career development. Programs are also being developed in the area of employability training.

Information on the program may be obtained by writing the Center for Career Development and Employability Training, University of Wisconsin, Oshkosh 54901.

Fetal Alcohol Syndrome—Significant Cause of Birth Defects

Margo Redmond

Recently, scientists have identified a new and significant cause of mental retardation and various other birth defects. Fetal Alcohol Syndrome (FAS) is the third leading recognizable cause of mental retardation in the United States; and, it is the only one that is totally preventable—the only one over which a pregnant woman can have total control. Because drinking alcohol during pregnancy annually places about 3,000 Wisconsin children at risk of some degree of impairment, it is of utmost urgency that information about the effects of alcohol on the unborn be widely circulated and understood. This topic has particular relevance for educators and health professionals concerned with helping children make maximum use of their potential.

FAS—A Definition

Fetal Alcohol Syndrome (FAS) is a name given by researchers in 1973 to a pattern of physical, mental, and behavioral problems observed in infants born to women who drank heavily during pregnancy. FAS symptoms may include lowered birth weight, slowed growth after birth, a small head, facial irregularities, heart defects, joint and limb irregularities, and mental retardation.

Spectrum Situation

Some alcohol-affected infants are born with all of the FAS characteristics, while others display only some less severe aspects of the syndrome. Behavioral symptoms such as hyperactivity, extreme nervousness, and short attention spans indicate that brain damage may have occured even though the child has no visible signs of FAS. Certain experts believe that alcohol may be a major cause of minimal brain dysfunction and hyperactivity, from which 5 to 10% of the school-age population suffers.

Influential Factors

How these potentially damaging effects on the unborn baby occur may be more easily understood by knowing how alcohol interacts with the fetus. When a pregnant woman takes a drink, the

— Courtesy Illinois Fetal Alcohol Syndrome Work Group

alcohol readily crosses the placenta to the fetus, traveling through the fetal bloodstream in the same concentration as that of the mother. However, the developing system of the fetus is not well equipped to handle alcohol. Among other things, its undeveloped liver can burn up alcohol at less than half the rate of an adult liver, causng alcohol to remain in the fetal system *longer* than in the adult system.

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Whether or not a woman who drinks will have an FAS baby is dependent on several factors, including quantity, timing, and individual genetics. Obviously, the more she drinks, the greater the risk, but one big drinking binge at a critical period of fetal development could be more injurious than small amounts of alcohol ingested over a period of time. Moreover, some babies are simply more susceptible for reasons we don't yet understand, and relatively small amounts of alcohol may adversely affect them.

Recommendations

Because the research into FAS was begun so recently, we don't know just how much alcohol on any one occasion is "too much." Some authorities are saying the only safe decision is not to drink alcohol at all during pregnancy and, possibly, even for an indefinite period prior to it. Others advise that, if a pregnant woman chooses to drink, she drink no more than one or two drinks on any one occasion.

We *do* know there has never been an FAS baby born to a non-drinker. Babies with extreme FAS abnormalities have been born to heavy drinkers, and babies with lesser impairments linked to FAS have been born to less heavy drinkers. Even moderate amounts of alcohol may prevent the unborn child from developing in the best possible way. It is a matter of *degrees* of risk, and whether that risk is worth taking is something that each person must decide.

Campaign in Progress; Materials Available

A statewide campaign to make the public (particularly women approaching or of childbearing age) aware of the dangers of drinking during pregnancy will cultiminate with the proclamation of January 1980 as "FAS Awareness Month," by the Governor. Between now and then, FAS materials are being disseminated to educators and health professionals so they can be a source of information on a local and personal level.

A brochure, "Choices for the Future: Alcohol & Pregnancy," has been prepared to help teenage women make well-informed decisions about drinking and pregnancy. Another brochure, "Alcohol and Your Unborn Baby," describes FAS in more detail. Both brochures, as well as posters and other FAS materials, are available for the cost of postage and handling from the Clearinghouse, Box 841, Madison, WI 53701—(608) 263-2797.

In addition, a FAS resource packet is newly available in medical libraries throughout the state. The packet contains medical research articles and technical and non-technical bibliographies, listing sources of articles, pamphlets, and audio-visuals on FAS. It is available through the library at Central Wisconsin Center for the Developmentally Disabled (317 Knutson Drive, Madison 53704, (608) 266-1164) or at local medical libraries.

Campaign sponsors (i.e., the Wisconsin Association on Alcohol and Other Drug Abuse, Inc.—in cooperation with the State Bureau of Alcohol and Other Drug Abuse and The Wisconsin Clearinghouse for Alcohol and Other Drug Information—all located in Madison) are willing to lend additional assistance in arranging speakers for special programs on this subject.

School personnel are urged to become informed and involved in helping to prevent this most preventable of all birth defects.

Resource Material

ADOLESCENT SUICIDE: MENTAL HEALTH CHALLENGE. The adolescent suicide rate has nearly tripled since the late 1950's and today suicide is the third leading cause of death among 15 to 19-year-olds. On college campuses, suicide rates second as a cause of death among students. Examined in this 20-page booklet are psychological and social causes as well as warning signs and what can be done to help. Copies of the booklet (No. 565) are available at 50¢ each (with quantity order discounts) from the nonprofit Public Affairs Committee, 381 Park Avenue South, New York, NY 10016.

GUIDANCE AND COUNSELING IN THE SCHOOLS: PERSPECTIVES ON THE PAST, PRESENT AND FUTURE. This 242-page publication reflects the findings of an in-depth study of the current status of guidance and counseling in American education.

Author Edwin L. Herr has responsibly organized and presented the findings of the project in a very comprehensive report. The many issues affecting the improvement and expansion of guidance and counseling have been defined and a series of important recommendations are presented which constitute an "agenda for action" for the profession of school counseling in the 1980's.

Copies of the publication are available from: APGA Publication Sales, Two Skyline Place, Suite 400, 5203 Leesburg Pike, Falls Church, VA 22041. (Publication #72124 Price: Member - $7.50, Non-Member - $9.00)

The Wisconsin Writing Project: Teachers Helping Teachers With Teaching

Stephen Koslow

[Editor's Note: The content and principal focus of this article is on a subject other than pupil services practices and/or personnel. We have chosen to include it in Guidelines, *however, because it does focus on an area of skill development with which many students have difficulty. Students who experience this difficulty often have trouble in many other aspects of their cognitive development; difficulties which compound and also affect affective development. Thus, the focus of this article should be of interest to the pupil services practitioner because it addresses a viable solution to a significant problem. The pupil services worker needs to be aware of activities such as the WWP and to bring these to the attention of his or her teaching colleagues.]*

> The important thing about the Wisconsin Writing
> Project is . . .
> the people
> and the strategies, and the research,
> and the holes in all the handouts
> so that they fit in the personalized, green
> three-ring binder.
> The important thing about the Wisconsin Writing
> Project is . . .
> the exhaustion
> which seems worth it,
> and the writing, which means pain.
> The important thing about the Wisconsin Writing
> Project is . . .
> the people, and the strategies,
> and the people, and the research,
> and the people,
> and the people,
> and the people . . .
>
> *Irene Diamond, Malcolm Shabazz High School*
> *Participant in the Wisconsin Writing*
> *Project (modeled after* The Important
> Book *by M. W. Brown).*

The Wisconsin Writing Project (WWP) is people—intelligent, creative teachers dedicated to improving the writing of their students. Begun in the summer of 1978 on the University of Wisconsin, Madison campus, and repeated during the past summer of 1979, the Project relies on some basic assumptions:

- There are simple strategies which can aid in the teaching of writing.
- Writing is a process we share with our students.
- No single philosophy of writing exists.
- For a writer to excel, there needs to be unending support and care.
- Teachers taught with support and care will inevitably teach with support and care.

The WWP proves that people with common interests can work toward a common goal—in this case, the goal of improving writing instruction in Madison area schools by helping teachers gain new strategies and revitalize their interest in writing. Through four weeks of intensive work, thirty elementary, middle, and high school teachers from the Madison area met to work on the process of writing. This unique opportunity to interact with teachers from a variety of grade levels helped participants see how others approach the writing process. Misconceptions disappeared as teachers learned that everyone faced the same challenge of motivating students to write competently and enthusiastically. "Writing is an integral part of learning. Using writing in science clarifies and reinforces what has been learned through experimenting," said Jacque Hay, Deerfield Science Teacher.

Professor Marjorie Smelster, director of the WWP, worked with teachers through four difficult papers, including an autobiographical sketch

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and a short story. She believes that if participants were to understand what they asked of their students, they would have to experience the anguish and ecstacy of writing first hand. "Many of us hadn't written in years. It was hard work to put words down on paper. It had been a long time," said Tom Braunger of Waunakee High School.

As well as relearning how to write, Professor Smelster and experts from around the area showed how to incorporate the latest teaching strategies. Their expertise and the participants' years of experience led to many fruitful dialogues on pedagogy. These strategies formed the base from which the teachers developed five field guides. Five small groups were created, each charged with researching and writing a guide that pertained to a specific topic in the writing process. This year the guides ranged from using the *fieldwork technique* to exploring the uses of popular culture in the teaching of writing. The 1979 guides, along with the five guides from the year before, will be used by workshop participants in the coming year to provide in-service programs for teachers throughout the region.

Participants learned that to teach writing effectively you not only need to acquire strategies but must also put these strategies into a philosophical and pedagogical framework. "The important thing about the Wisconsin Writing Project is . . . it pulls ideas from our heads," said Diane Rose of Black Earth Elementary School. It was never assumed or expected that we would all teach the same way. The teachers were, after all, individuals with their own beliefs and ideologies. They supported each other in their individual endeavors to arrive at workable ideas. They brainstormed, critiqued, suggested, and comforted as they collectively and individually struggled through concepts that were presented to them or discovered in their research.

> The important thing about the Wisconsin Writing Project is . . .
> sharing with other people who have the same concerns.
> You can learn from it; you can even get nervous about it.
> It makes you get up early every morning and go to bed late every night.
> You get new ideas, recycle old ideas.
> But the most important thing about the Wisconsin Writing Project is . . .
> sharing with other people who have the same concerns.
>
> Maureen McGilligan-Bentin
> Gompers Middle School

This cooperative venture helped the teachers grow and gave them confidence to approach a new year with excitement and anticipation. Mary Larsen of Poynette Middle School summed up everyone's feelings: "I can hardly wait to work with the kids. So many new ideas, new ways to reach them. It's going to be good."

Several participants of the 1978 workshop returned and shared how the Project had actually affected their students:

> ". . . our enrollment in elective writing courses more than doubled. We instituted a new course on basic skills."
>
> Else Thompson
> Columbus High School

> ". . . I developed for each of my classes a sequential and concentrated writing program based on my enhanced understanding of sound theory, workable strategies, and effective evaluation techniques."
>
> Pat Woodring
> Madison West High School

> ". . . other teachers used my ideas and techniques with their students. They had me do demonstration lessons with their classes to introduce writing activities. Teachers also used me as a resource to discuss theory, motivation, enthusiasm, goals, etc."
>
> Nancy Haugen
> Pack School

> ". . . Did my students improve? Definitely!"
>
> Claire Ryan
> E. G. Kromrey Middle School

As the Project continues, the number of students who will be touched by these teachers will multiply — a thought which is encouraging.

For the most part, the Wisconsin Writing Project, as it is now structured and carried out, works. The Project encourages teachers to grow and channel this growth into positive curricular and additudinal changes. Follow-through is the main concern of participants in the Project. "If I don't continue to meet with these people here, how long will it be before I get wrapped up in the petty obstacles that all writing teachers come across? I need to keep working with people who have vision," said Dianne Schumann, Black Earth Elementary School. Teaching is like writing—it is a process which needs to develop and mature continually. The hope is for a teacher

network that will allow and encourage this continual growth and which will help the teachers utilize their colleagues from around the city as resources. The need has been talked about for enlarging the current structure so that an organized and funded network of communication could evolve. Ideally, the structure would act as an umbrella over projects that are taking place simultaneously. Projects could include a newsletter circulated throughout the region where teachers involved in the workshop can exchange ideas, methods and inservice plans, or regularly scheduled meetings where participants in the Project can hear presentations from experts around the region on the latest research in writing and teaching. Positive, creative ideas can radiate throughout the area affecting educators at every level.

As states throughout the country move closer to standardized programs which lock teachers into specific methodology, it seems that the Madison area is on the threshold of developing a program which could improve students' writing and at the same time preserve the art of teaching.

No one presumes this to be an easy task—only an attainable one. There will need to be understanding and growth from both teachers and administrators and an appreciation that the goal is a common one: to increase the competency of students in an environment conducive to teaching and learning.

As dedicated professionals, as teachers working with and for teachers toward this common goal, the rate of burnout among educators can be reduced and the level of competency in students raised. Those associated with the Wisconsin Writing Project are dedicated to seeing this goal become a reality.

The important thing about the Wisconsin Writing Project is . . .
it works and should grow,
and should grow,
and should grow,
and should grow . . .

Book Review

Gutsch, K. U. & Thornton, L. L. *Insights into Human Development: Commentaries.* Jackson: University Press of Mississippi, 1979, 176 pages.

Insights into Human Development: Commentaries contains biographical information, summaries of concepts, and brief annotations of the major works of eighty-one prominent behavioral scientists. Contributors to the fields of counseling, psychotherapy, research, social work and psychology are represented, including such notables as Sigmund Freud, B. F. Skinner, Carl Rogers, and William James. These behavioral scientists' writings were included in the book because of the "interesting, inspirational, innovative and/or creative" nature of their work and because they exerted tremendous influence in the field of human development.

The major strengths of the book are the format and the content. The concise, uniform format consists of three sections about each contributor. First, biographical information is outlined, including the place and date of birth, present status, educational background, professional background, field of work, and professional affiliations. The second section consists of a short description of the contributor's basic concepts about human development. The final section consists of a brief annotated bibliography of the contributor's foremost publications. The information on each contributor is limited to several pages.

This clear, uniform presentation makes *Insights into Human Development: Commentaries* a useful reference for both professional and lay persons interested in human development. Such a resource could be valuable in locating specific information about the lives and work of the contributors, understanding the work done by behavioral scientists in the late 19th and 20th centuries, and selecting reference materials for educational purposes.

The title accurately summarizes the authors' approach to the book. Facts about these behavioral scientists are blended with the personal impressions of the authors into commentaries reflecting the significance of each contributor. Summarizing briefly the concepts and ideas of the contributors is an ambitious undertaking. Occasionally, the authors' evaluations appeared to lack objectivity, which detracted from the strength of the book as an unbiased reference. However, these "self-styled impressions," as the authors labeled them, do not appear in either the biographies or in the annotations.

Insights into Human Development: Commentaries could be an informative addition to the libraries of persons interested in human development. Not only does it offer facts and figures in an organized way, but the variety of the format and the commentaries make it a readable reference. **Phyllis Post,** *Doctoral Student, Department of Counseling and Guidance, University of Wisconsin, Madison.*

STAFF NEWS, ET CETERA

SEVERSON LEAVES WDPI STAFF

Don Severson, WDPI Supervisor for Counseling and Guidance, resigned in September. Severson has formed a private business in consulting and training. He joined the Department in December, 1972. Active in state and national counseling and guidance organizations, Don served as President of the American School Counselor Association during 1975-76. As a WDPI staff member, he was responsible for working with career guidance programs including implementation of the guidance and counseling activities supported under the Vocational Education Act.

The Pupil Services staff takes this opportunity to thank Don for his many contributions to the profession and to wish him well in his new endeavors.

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ELEMENTARY SCHOOL DEVELOPMENTAL GUIDANCE CURRICULUM GUIDES HOT ITEM

One of the "hottest" items made available to local school through the Pupil Services Section in recent years has been sets of elementary school developmental guidance curriculum guides. Unfortunately, our supply of these has been exhausted and funds for printing additional sets are not presently available. However, the story behind these guides merits telling.

In 1976-77, the Racine school system developed and field-tested an elementary school developmental guidance curriculum. During 1977-78, the Menasha Public Schools received a grant under ESEA Title IV-C to adapt and adopt this curriculum in grades K-5. In 1978-79, ESEA IV-C grants were received by the Fall Creek (K-5) and Twin Lakes (K-8) school districts to adapt, adopt and expand Menasha's work. The Milton School District subsequently received an ESEA IV-C grant to further refine and expand these previous efforts.

In each instance, written developmental guidance curriculum guides were produced for each grade level — K-5, K-6 or K-8. Due to the limited grant funds and some constraints on the expenditure of these funds, it was not possible to make substantial numbers of extra sets of the guides available for distribution to other school districts. The extra sets which were finally available were distributed to local school districts on a first-call basis. Interested persons may, however, still review the various guides by requesting loan sets from the Pupil Services Section.

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STAFF SUPERVISOR APPOINTED TO NATIONAL REVIEW PANELS

William J. Erpenbach, WDPI Supervisor for Counseling and Guidance, recently completed responsibilities associated with serving on two national review panels earlier this year. Erpenbach was appointed as a member of the National Institute of Education's (NIE) Policy Study on Counseling and Guidance and of the National Center for Research in Vocational Education's (NCRVE) Study of Career Development Program Planning in Secondary Schools.

The NIE undertaking centers on the development of a publication addressing certain policy recommendations in guidance and counseling aimed at resolution of social/educational/occupational concerns of our society. It is hoped that such a publication will greatly aid policy makers at a wide range of levels and settings in making the necessary enabling decisions.

The focus of the NCRVE panel was on measuring the effectiveness of the Career Planning Support System (CPSS). CPSS is an integrated set of materials designed to help secondary schools tailor their guidance programs to fit students' career development needs.

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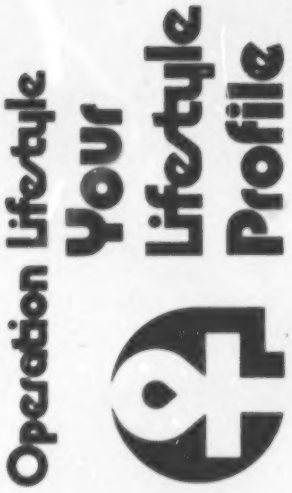

OPERATION LIFESTYLE

In a recent "Health Education Update" bulletin to local school district health education coordinators, WDPI Health Education Supervisor, **Chet Bradley,** announced information regarding a television program and pamphlet entitled, "Operation Lifestyle — Your Lifestyle Profile." Bradley noted that this simple self-assessment of one's lifestyle is the focus of a new half-hour television program broadcast statewide during October over the Educational Television Network.

Using the colorful pamphlet, or watching the television program, one is asked to score himself/herself on various questions dealing with exercise and nutrition, tobacco, alcohol and other drugs, and personal health and safety. Point totals are indicative of whether personal lifestyles are considered "excellent," "good," "risky," or "hazardous." Limited copies of the pamphlet are available on request to Bradley at WDPI. The television screening is a cooperative project of the Wisconsin Educational TV Network, WDPI and the State Medical Society.

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UPADATE ON SCHOOL PSYCHOLOGY

Len Pennington, WDPI Supervisor for School Psychological Services, recently provided the Department's Pupil Services Section a capsule update on items of significance to school psychologists. These items are described below for the convenient reference of *Guidelines* readers.

The mailing of *Non-Biased Assessment* to all school psychologists, trainers, district administrators, and directors of special education is now completed. This publication is excellent and warrants careful reading. Responses to the Adaptive Behavior assessment questionnaire are being analyzed and results will be reported in a future issue of *Guidelines.* Position papers on qualified professional supervision, health treatment services and psychological records are underway and will appear in future issues.

Two meetings with professional supervisors will be conducted this fiscal year. Workshops are being developed for practitioners in regard to non-biased assessment and will be announced. Workshops for professional supervisors on special considerations for psychological services with the deaf and hard of hearing are being developed in conjunction with Sam Milesky, DHC, WDPI.

The new excess cost aid formula for school psychologists will be developed by January '80 and will go into effect during the '81 fiscal year ('80-'81 school year). Approval criteria for school psychology training programs are being developed in conjunction with trainers and practitioners and will be adopted as administrative code, probably within this fiscal year.

Serious staff shortages have developed this year unexpectedly and about ten districts are still without school psychological services. Encourage your colleagues to join us in wonderful Wisconsin.

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